

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000154

Entity Name: CAMPBELL AGENCY, INC.

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

325 84TH STREET S.W.  
BYRON CENTER, MI 49315

## New Principal Place of Business:

5664 PRAIRIE CREEK DR  
CALEDONIA, MI 49316

## Current Mailing Address:

P.O. BOX 1788  
GRAND RAPIDS, MI 495011788

## New Mailing Address:

FEI Number: 32-0022430      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WABEKE, MARK  
4625 EAST BAY DRIVE #227  
CLEARWATER, FL 337645736 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: COLLINS, DONALD M  
Address: 5594 DISCOVERY DR., SE  
City-St-Zip: KENWOOD, MI 49508

Title: CEO ( ) Delete  
Name: SCHINNERER, EDWARD M JR.  
Address: 1491 FAIRWOOD COURT  
City-St-Zip: CALEDONIA, MI 49316

Title: VP ( ) Delete  
Name: VAN DAM, PAUL L  
Address: 3681 144TH AVENUE  
City-St-Zip: HAMILTON, MI 49419

Title: VP ( ) Delete  
Name: GENZINK, TIMOTHY  
Address: 3603 ELK CT.  
City-St-Zip: ZEELAND, MI 49464

Title: CFO ( ) Delete  
Name: DIEPENHORST, CHRISTOPHER  
Address: 9151 BLUFF LAKE STREET  
City-St-Zip: ZEELAND, MI 49464

Title: VP ( ) Delete  
Name: BARNABY, CURTIS L  
Address: 3448 92ND ST., SE  
City-St-Zip: CALEDONIA, MI 49316

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER DIEPENHORST

CFO

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date